

# Supplemental Independent Expenditure Report

(Government Code Sections 84203.5)  
SEE INSTRUCTIONS ON REVERSE

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period from <u>01/01/2006</u> through <u>10/21/2006</u> Date of election if applicable: (Month, Day, Year) <u>11/07/2006</u>	Date Stamp <b>RECEIVED</b> San Jose City Clerk 2006 OCT 27 P 2:21	CALIFORNIA FORM <b>465</b> 1 / 4 For Official Use Only
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Amendment No. \_\_\_\_\_

Report No. SIE483-61021

☐ Amendment (Explain Below)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 1. Committee/Filer Information

I.D. NUMBER (if recipient committee)  
970764

### NAME OF FILER

COMPAC Issues Fund, Sponsored by the San Jose Silicon Valley Chamber of Commerce  
sponsored by San Jose Silicon Valley Chamber of Commerce

### STREET ADDRESS (NO P.O. BOX)

310 South First Street

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Jose	CA	95113	(408) 291-5262

OPTIONAL: FAX/E-MAIL ADDRESS

( )

## Treasurer (If recipient committee)

### NAME OF TREASURER

Kirk Alan Pessner

### MAILING ADDRESS

20 Park Road, Suite E

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burlingame	CA	94010	(650) 401-8735

OPTIONAL: FAX/E-MAIL ADDRESS

## 2. Name of Candidate or Measure Supported or Opposed

NAME OF CANDIDATE  
Cindy Chavez

OFFICE SOUGHT OR HELD  
Mayor, City of San Jose

NAME OF BALLOT MEASURE

BALLOT NO./LETTER

JURISDICTION

CHECK ONE

SUPPORT OPPOSE

X

## 3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

Please see attached pages

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## 4. Summary

1. Total independent expenditures made of \$100 or more this period. (Part 3)	\$	69466.34
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$	0.00
3. Total independent expenditures made this period (Add Lines 1 + 2.)	TOTAL \$	69466.34

## 5. Filing Officers

Enter the official title and address of each filing officer with whom most recent campaign statements have been filed.

Please see attached pages

## 6. Verification

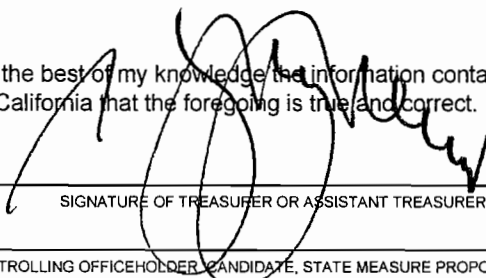
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/23/2006  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By   
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period	<b>CALIFORNIA</b> <b>FORM 465</b>
from <u>01/01/2006</u>	
through <u>10/21/2006</u>	3 / 4

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NAME OF FILER

COMPAC Issues Fund, Sponsored by the San Jose Silicon Valley Chamber of Commerce sponsored by San Jose Silicon Valley Chamber of Commerce

I.D. NUMBER (If Recipient Com.)

970764

## 5. Filing Officers Enter the official title and address of each filing officer with whom most recent campaign statements have been filed.

1) NAME OF FILING OFFICER

Secretary of State

ADDRESS

(NO. AND STREET)

1500 - 11th Street, Room 495

CITY

STATE

ZIP CODE

Sacramento

CA

95814

1) NAME OF FILING OFFICER

Los Angeles County Registrar-Recorder

ADDRESS

(NO. AND STREET)

12400 Imperial Highway

CITY

STATE

ZIP CODE

Norwalk

CA

90650

1) NAME OF FILING OFFICER

San Francisco Department of Elections

ADDRESS

(NO. AND STREET)

One Dr. Carlton Goodlett Place, Room 48

CITY

STATE

ZIP CODE

San Francisco

CA

94102

1) NAME OF FILING OFFICER

Santa Clara County Registrar of Voters

ADDRESS

(NO. AND STREET)

1555 Berger Drive, Building 2

CITY

STATE

ZIP CODE

San Jose

CA

95112

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

For use by an officeholder, candidate, or committee making independent expenditures totaling \$500 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

Report covers period

from 01/01/2006

through 10/21/2006

Date Stamp

CALIFORNIA  
FORM **465**

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## 3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC.31)
10/11/2006	TAB Communications, Inc. 3062 Yellowstone Lane  Sacramento CA 95821 Reference No:	Mailing	23522.42	23522.42
10/16/2006	TAB Communications, Inc. 3062 Yellowstone Lane  Sacramento CA 95821 Reference No:	Mailing	45943.92	45943.92